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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	A2-163 US
	First Inventor	Mei Lin Ong
	Title	TERMINAL WITH FLEXIBLE TA
	Express Mail Label No.	EV187772119US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>11</u>] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>3</u>] 5. Oath or Declaration [Total Sheets <u>2</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

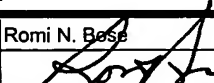
Prior application information:

Examiner

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number:	23683	OR	<input type="checkbox"/> Correspondence address below
Name	Romi N. Bose		
Address	Molex Incorporated 2222 Wellington Court		
City	Lisle	State	Illinois
Country	USA	Zip Code	60532
Telephone	630/527-4419	Fax	630/416-4962
Name (Print/Type)	Romi N. Bose	Registration No. (Attorney/Agent)	43,322
Signature		Date	11/12/03

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

 15535 U.S. PTO
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Compleat if Known

Application Number	
Filing Date	11/12/2003
First Named Inventor	Mei Lin Ong
Examiner Name	Unknown
Group Art Unit	
Attorney Docket No.	A2-163 US

TOTAL AMOUNT OF PAYMENT (\$) 810.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50-1873

Deposit Account Name: Molex Incorporated

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130 205 65		Surcharge - late filing fee or oath	
127 50 227 25		Surcharge - late provisional filing fee or cover sheet	
139 130 139 130		Non-English specification	
147 2,520 147 2,520		For filing a request for <i>ex parte</i> reexamination	
112 920* 112 920*		Requesting publication of SIR prior to Examiner action	
113 1,840* 113 1,840*		Requesting publication of SIR after Examiner action	
115 110 215 55		Extension for reply within first month	
116 400 216 200		Extension for reply within second month	
117 920 217 460		Extension for reply within third month	
118 1,440 218 720		Extension for reply within fourth month	
128 1,960 228 980		Extension for reply within fifth month	
119 320 219 160		Notice of Appeal	
120 320 220 160		Filing a brief in support of an appeal	
121 280 221 140		Request for oral hearing	
138 1,510 138 1,510		Petition to institute a public use proceeding	
140 110 240 55		Petition to revive - unavoidable	
141 1,280 241 640		Petition to revive - unintentional	
142 1,280 242 640		Utility issue fee (or reissue)	
143 460 243 230		Design issue fee	
144 620 244 310		Plant issue fee	
122 130 122 130		Petitions to the Commissioner	
123 50 123 50		Processing fee under 37 CFR 1.17(q)	
126 180 126 180		Submission of Information Disclosure Stmt	
581 40 581 40		Recording each patent assignment per property (times number of properties)	
146 740 246 370		Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740 249 370		For each additional invention to be examined (37 CFR § 1.129(b))	
179 740 279 370		Request for Continued Examination (RCE)	
169 900 169 900		Request for expedited examination of a design application	
Other fee (specify) Assignment			40.00

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740 201 370		Utility filing fee	770.00
106 330 206 165		Design filing fee	
107 510 207 255		Plant filing fee	
108 740 208 370		Reissue filing fee	
114 160 214 80		Provisional filing fee	
SUBTOTAL (1)			(\$) 770.00

2. EXTRA CLAIM FEES

Total Claims: -20** = X =

Independent Claims: -3** = X =

Multiple Dependent: =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
103 18 203 9		Claims in excess of 20	
102 84 202 42		Independent claims in excess of 3	
104 280 204 140		Multiple dependent claim, if not paid	
109 84 209 42		** Reissue independent claims over original patent	
110 18 210 9		** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$)

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00

SUBMITTED BY

Name (Print/Type)	Romi N. Bose	Registration No. (Attorney/Agent)	43,322	Telephone	630-527-4419
Signature		Date	11/12/2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.